



Application for Driver's School License

Please complete both sides of application. Print in ink or type.

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| <input type="checkbox"/> Application Filing Fee (not refundable)- \$200.00 | <input type="checkbox"/> Change of Officers- \$20.00 |
| <input type="checkbox"/> Primary Facility- \$150.00 | <input type="checkbox"/> Change of Name- \$20.00 |
| <input type="checkbox"/> Branch Facility- \$150.00 | <input type="checkbox"/> Duplicate- \$20.00 |
| <input type="checkbox"/> Change of Address- \$20.00 | <input type="checkbox"/> Renewal (Primary/Branch)- \$150.00 |

Business Name (as appears on surety bond (CS-072))

School Number

Business Phone

Site Address

Street

City

County

State

Zip Code

Please list all owners, partners, and officers of corporation below:

Name of Owner, Partner or Officer	Driver's License #	Position	Home Phone No.	Date of Birth
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Street Address (Home)	City	State	Zip Code
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Name of Owner, Partner or Officer	Driver's License #	Position	Home Phone No.	Date of Birth
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Street Address (Home)	City	State	Zip Code
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Name of Owner, Partner or Officer	Driver's License #	Position	Home Phone No.	Date of Birth
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Street Address (Home)	City	State	Zip Code
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Type of Business: ☐ Owner ☐ Joint Owner ☐ Partner ☐ Corporation

If applicant is a corporation, under the laws of what state are you incorporated? _____
(If incorporated in another state other than Maryland, you must attach a certified copy of the permit to do business in Maryland as a foreign corporation.)

Yes No

- ☐ ☐ Has applicant been previously licensed to operate a Driver's School? If yes, was license revoked? _____ Date _____
- ☐ ☐ Has owner, partner or corporate officer listed above ever been convicted of any violation of the Driver's School License Law as provided in Section 15-710 of the Transportation Article?
- ☐ ☐ Has any owner, partner or corporate officer listed above ever been convicted of any violation of the Motor Vehicle laws in any state or territory? If yes, please explain on a separate sheet.
- ☐ ☐ Has any owner, partner or corporate officer listed above ever been convicted of any moral turpitude in any state or territory? If yes, please explain on a separate sheet.
- ☐ ☐ Is any owner, partner or corporate officer listed above currently employed by the State of Maryland? If so, what agency?

Signator Certification: It is illegal for anyone to give false or fictitious information for a Driver's School License. Since this certification is considered part of the application, anyone who provides or certifies to a false or fictitious statement or information herein may be prosecuted and/or have his or her license cancelled.

I/we certify under penalty of perjury, that the information stated herein is true and correct to the best of my/our knowledge, information and belief.

Applicant's Signature

Date

Please indicate within the space provided above, driver's school office and classroom operating days and hours.
Please notify the Motor Vehicle Administration immediately, in writing, if there is any change in this information.

Federal Tax Identification Number _____

Vehicle Liability Insurance Certification

I certify under penalty of perjury that the minimum limits of insurance coverage are maintained with the following company:

Name of Insurance Company

Policy/Binder Number

Name of Agent

Certification of Workmen's Compensation

Maryland State Workmen's Compensation Law requires employers with one or more employees and corporations to file a Certificate of Compliance.

I/we certify coverage has been obtained as follows:

Name of Insurance Company

Policy/Binder Number

Effective Date

Surety Bond Certification

I/we certify a surety bond has been obtained as follows:

Name of Bonding Company

Policy/Binder No.

Effective Date

Primary Facility Information Only

The individuals listed below are authorized to sign on behalf of the driver's school:

Name

Signature

Name

Signature

Name

Signature

Name

Signature

For MVA use only

Validation:

☐ Cash

☐ Check

License Number

Approved

Date

Concurrence

Date